Transient Collateral Arteries Developed During Coronary Vasospasm

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A 46-year-old man was admitted to our hospital for recurrent chest pain at rest. He was a non-smoker. Coronary angiogram (CAG) revealed no significant stenosis of the right coronary artery (RCA), but grade 3 collateral arteries from

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the distal left coronary artery (LCA) to the distal RCA were observed on CAG for the LCA (Picture A, B) (1). A second CAG for the RCA revealed 99% stenosis of the middle RCA (Picture C). He did not complain of chest pain and no significant ischemic ST-T changes in the electrocardiogram were observed. The disappearance of the collateral arteries was observed using contralateral injection after the relief of the RCA stenosis with the intracoronary administration of vasodilator agents (Picture D, E). We experienced a case in which collateral arteries developed during coronary vasospasm and were observed on CAG.

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Reference